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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)									
_	Rep. Rob Woodall (b) Address (number and street)	☐ Check if address changed				2. Candidate's FEC Identification Number				
	PO Box 1871				H0GA07133					
	(c) City, State, and ZIP Code	0.00404074					lew	Amende	∍d	
_	Lawrenceville	GA 30046-1871				Statement X (N	N) OR	(A)		
4.	Party Affiliation REPUBLICAN PARTY	Office Soug House	ht		6. State & Dist	rict of Candidate 07				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 (year of election)									
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
(a) Name of Committee (in full) ROB WOODALL FOR CONGRESS										
	(b) Address (number and street) POST OFFICE BOX 1871									
	(c) City, State, and ZIP Code									
	Lawrenceville				GA	30046-1871				
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives) 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.										
candidacy. NOTE: This designation should be filed with the principal campaign committee.										
(a) Name of Committee (in full)										
	(a) Name of Committee (in fair)									
	(b) Address (number and street)								—	
	(c) City, State, and ZIP Code									
	I certify that I have exa	mined this Stat	ement and to	the best of	my knowledge a	and belief it is true, correct	t and complet	e.		
Signature of Candidate						Date			•	
Re	ep. Rob Woodall	[Electronically Filed]				01/31/2013				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.										

FEC FORM 2 (REV. 02/2009)